

Oregon Park District
304 S. Fifth Street, PO Box 237, Oregon, IL 61061
Pre-Employment Application



Name _____
Last First MI

Address _____
Street City State Zip

Home Phone Number _____ Cell Phone Number _____

Are you 18 years or older? _____ Yes _____ No

Employment Desired

Position _____ Date you can start? _____

Are you currently employed? _____ If so, may we inquire of your present employer? _____

Education	Name & Address of School	No. of Years Attended	Did you Graduate?	Subjects Studied
Grammar School				
High School				
College			If yes, when?	
Trade, Business or Correspondence School				

General

Subjects of special study or research work: _____

Special Skills: _____

The Oregon Park District has a medical review policy which includes a drug test following a conditional job offer. A start date would not be set until the drug test is complete and satisfactorily meets the Oregon Park District requirements.

The Oregon Park District will require a criminal background check following a conditional job offer.

Former Employers: (Start with the most recent)

Month & Year	Name & Address of Employer	Position, Duties & Salary	Reason For Leaving
From _____ To _____			
From _____ To _____			
From _____ To _____			

References: Give the names of three persons not related to you, whom you have known at least one year, one of which must be occupational or work related.

Name	Phone & Address	Business	Years Acquainted
1.			
2.			
3.			

In case of emergency notify: _____
Name
Address
Phone Number

Have you ever been convicted of a felony or misdemeanor? (If you answer yes to this question you will not be automatically disqualified from employment.) _____ Yes _____ No

I hereby affirm that the information provided on the attached application for employment with the Oregon Park District is true and complete to the best of my knowledge. I also understand that any falsified information or significant omissions may disqualify me from further consideration for employment and may be considered justification for dismissal if discovered at a later date.

I authorize investigation of all statements contained herein and the references listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing same to you.

I understand that my employment is employment at will, that I am not being employed for any specific term, and that this application is not intended to be a contract for continued employment.

Applicant: _____
Signature
(Print Name)
(Date)

Do Not Write Below This Line

Interviewed by: _____ Date: _____ Remarks: _____

Hired: _____ Yes _____ No Position _____ Dept. _____

Salary/Wage: _____ Date Reporting to Work: _____

Hired by: _____ / _____ / _____
Signature
Title
Date